



DEPARTMENT OF THE ARMY
OFFICE OF THE DEPUTY CHIEF OF STAFF G-1
300 ARMY PENTAGON
WASHINGTON, DC 20310-0300

0 2 APR 2014

DAPE-ARR-SA

MEMORANDUM FOR COMMANDERS OF THE ACTIVE ARMY, ARMY NATIONAL
GUARD ON TITLE 10 STATUS AND ARMY RESERVE

SUBJECT: Commander Guidance for Probable Cause Testing for **Steroids**

1. Steroid testing is not a standard test on the Department of Defense Drug Demand Reduction Program (DDRP) testing panel. Army Forensic Toxicology Drug Testing Laboratories (FTDTL) test for seven categories of drugs (THC, synthetic cannabinoids, cocaine, amphetamines, designer amphetamines, opiates and benzodiazepines).
2. The Fort Meade FTDTL manages the Army's Steroid Testing Contract. Steroid testing is expensive, time consuming and limited in the number of tests allocated each year by DoD contract. Commanders will use test basis code Probable Cause (PO) during collection search or seizure when there is reasonable belief that the urine to be collected contains evidence of illegal drug use, pursuant to the Military Rules of Evidence (M.R.E.) 312 and 315. The commander should verify that they have sufficient probable cause by consulting with their supporting Staff Judge Advocate (SJA) IAW Army Regulation (AR) 600-85, The Army Substance Abuse Program, paragraph 10-2b. The commander must submit a memorandum requesting a PO test (Enclosure 1) with concurrence from SJA. This memorandum will be forwarded with the DD Form 2624.
3. Based on the concurrence from SJA, Commanders must coordinate with the Installation Army Substance Abuse Program (ASAP), National Guard Drug Testing Coordinator (DTC), Reserve Alcohol and Drug Control Officer (ADCO), or Base Area Code (BAC) Manager for deployed area for processing and shipping the PO specimen(s) to their supporting FTDTL.
4. Random testing and unit sweeps will not be accepted. Prior coordination must be made through the Drug Testing Branch, Army Center for Substance Abuse Programs (ACSAP). The laboratory will also contact the commander to verify the request.
5. Specimens collected for steroids must meet the following requirements:
 - a) The specimen collection is outlined in AR 600-85, Appendix E. The test basis code (PO) must be annotated on the DD Form 2624 Specimen Custody Document.
 - b) A separate DD Form 2624 is required for each steroid request.
 - c) The specimen bottle must have a minimum quantity of 60 ml for testing.

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d) The DD Form 2624 and specimen MUST be accompanied by a memorandum, signed by the commander, requesting that the specimen be tested for steroids. The memo must identify the specimen by Base Area Code, UIC, Batch Number, date collected, specimen number and SSN. DO NOT PLACE THE SOLDIER'S NAME ON THE MEMORANDUM. The memo must also contain the commander's phone number and e-mail address as the laboratory will contact the commander.

e) Leave Block A of the DD Form 2624, "Laboratory Conducting Drug Testing" blank.

f) Specimens collected for steroids will NOT be tested for any other drugs. A second sample must be collected if the commander wants a Soldier tested for steroids and other drugs on the testing panel.

g) All specimens will be mailed IAW AR 600-85 to Fort Meade:

COMMANDER
ATTN: PROCESSING SECTION
FORENSIC TOXICOLOGY DRUG TESTING LABORATORY
2490 WILSON STREET
FORT MEADE, MARYLAND 20755-5235

6. Results Reporting: There is a 6-8 week turnaround time for steroid testing. The DTC/BAC Manager/Alcohol and Drug Control Officer will receive the results via the iFTDTL portal and hardcopy. Steroid positive results must be processed by a Medical Review Officer (MRO) per MEDCOM Reg. 40-51 and AR 600-85 before any action is taken.

7. Additional questions regarding specimen submission should be directed to the supporting ASAP, National Guard DTC, Reserve ADCO, deployed BAC Manager or Mr. Buddy Horne, HQDA G-1, 703-571-7313 (DSN 671), freddie.m.horne.civ@mail.mil; or Mr. Dang Tran, HQDA G-1, 703-571-7307 (DSN 671), dang.p.tran.ctr@mail.mil.

LES MCFARLING
Director, Army Center for Substance
Abuse Programs

SPECIMEN CUSTODY DOCUMENT - DRUG TESTING

A. LABORATORY CONDUCTING DRUG TESTING

1. SUBMITTING UNIT

2. ADDITIONAL SERVICE INFORMATION (Second Echelon)

Army Substance Abuse Program
Bldg 2091 Kolekole Avenue
Schofield Barracks, HI 96857
Cml 808-655-0682, DSN 315-455-0682

B. BATCH NUMBER

C. REPORT OF RESULT (DTG/Serial No.)

3. BASE/AREA CODE
P 1 0 6 W

4. UNIT IDENTIFICATION CODE

5. DOCUMENT/BATCH NUMBER

6. DATE SPECIMEN COLLECTED (YYYY)

(MM)

(DD)

D. DRUGS TESTED

7. SPECIMEN NUMBER

8. COMPLETE SSN

9. TEST BASIS

10. TEST INFORMATION

11. PRESCREEN
THC | COC

E. DISC CODE

F. ACCESSION NUMBER

G. RESULT

H. CERTIFICATION. I certify that I am a laboratory certifying official, that the laboratory results indicated on this form were correctly determined by proper laboratory procedures, and that they are correctly annotated.

(3) CERTIFYING OFFICIAL (Printed Name and Title)

(1) SIGNATURE

(2) DATE SIGNED

12. CHAIN OF CUSTODY				THRU
DATE (YYMMDD) a.	RELEASED BY b.	LAN	RECEIVED BY c.	PURPOSE OF CHANGE / REMARKS d.
(1)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(2)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(3)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(4)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(5)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(6)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(7)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(8)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(9)	SIGNATURE	SIGNATURE		
	NAME	NAME		
(10)	SIGNATURE	SIGNATURE		
	NAME	NAME		

INSTRUCTIONS			
BLOCK	USA	USN/MC	USAF
1 SUBMITTING UNIT	Message address of unit submitting urine samples		
2 ADDITIONAL SERVICE INFORMATION (SECOND ECHOLON)	Do not use	Message address of second echelon commander to whom submitting unit reports administratively.	
3 BASE / AREA CODE	Service Code Area	Leave blank. For future use.	
4 UNIT IDENTIFICATION CODE	Unit Identification Code (UIC or RUQ) of unit submitting urine sample.	Do not use	
5 DOCUMENT/BATCH NUMBER	Do not use	Enter the locally assigned batch number. Each batch of 12 samples, or portion thereof, shall be assigned a separate number by the submitting unit.	
6 DATE SPECIMEN COLLECTED	Enter the four-digit year, two-digit month, and two-digit day that samples were collected by submitting unit.		
7 SPECIMEN NUMBER	Use number pre-printed on form to identify bottle.	Enter 3-digit sequential specimen number (last 3 characters of full BIDN).	
8 COMPLETE SSN	Full SSN of person from whom sample obtained.		
9 TEST BASIS	Indicate the testing premises to conduct the collection.		
10 TEST INFORMATION	MILITARY: A = E1-E4; B = E5 to 010; C = Civilian only; D = TDP Aviation; E = TDP Guard/police; F = TDP PRP; F = TD; G = ADAPCP Staff; N = other nonmilitary	Leave blank	Entry required only if additional testing is requested: F = Full Panel; S = Steroids; O = Other drugs; Provide clarification in attached message.
11 PRESCREEN	If screened (field tested) prior to submission and found positive, indicate P for positive or N for negative for drug(s) pre-screened. Leave blank if not screened prior to submission to lab.		Not used

12. CHAIN OF CUSTODY (LINE 11).

a. DATE - Date of collection/shipping.

b. RELEASED BY - Signature and printed or typewritten name of the urinalysis coordinator having custody of the samples.

c. RECEIVED BY - Use only if physical change of custody is occurring prior to shipment. Otherwise leave blank.

d. PURPOSE OF CHANGE/REMARK - Specify the mode of accountable transportation/system utilized to ship specimens to the lab.

NOTE: If/when custody of specimens changes other than for shipment (unless hand carried to lab), each change of custody requires line/number signatures in the (b) RELEASED BY and (c) RECEIVED BY blocks to document change in custody with comment (d). If a continuation sheet is necessary, it must contain information/signatures of blocks (a) - (d).

13. DAMAGE TO SHIPPING CONTAINER/DISCREPANCIES